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ORIGINAL DEPARTMENT.

Communications.

ROUGH NOTES

Of an Army Surgeon's Experience, during the Great Rebellion.

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No. 21.

Feigned Diseases.

Said a Medical Director of a corps to me one day: "I never believed in the doctrine of 'total depravity' until I came into the army, but now I am prepared to accept that and go further if it were possible." The remark was called forth by a conversation about feigned diseases, and I cite it here as a fitting introduction to an article upon the same subject.

It is difficult to bring to the mind of a practitioner in some quiet, rural district the zeal which some men in the army manifest to palm themselves off as sick men, and it would scarcely be believed until one has witnessed it for himself, how persistently men will attempt to malingere.

The term malingere, which has always been in use in the army to designate a soldier who feigned disease, has been almost entirely superseded by a slang term, of the origin of which I am as ignorant as I am of its orthography, but which is pronounced "*Dead Beat*." I may be pardoned for introducing it here, as its use is so universal among all ranks and classes, from Major-Generals to drummer boys, and because I have known of such ludicrous interpretations given to it by people at the North who heard it fall from the lips of an army officer. Like the word "*skedaddle*," which one now sees even in the official language of the sentence of a court martial, it is a word originating no one knows how, where, or when, but the use of which is universal.

The incentives to feign disease in the army are great, and the army practitioner has to be constantly on the alert to detect the true from the false. A regimental medical officer, if he knows

his regiment as he should, will soon be enabled to single out the "*Dead Beats*," and know who to suspect. But woe be to a medical officer fresh from civil life who takes charge of a "sick call" in an old regiment. Every malingere in the regiment makes his appearance at the "call," and such pains as he suffers, and such complaints as he pours into the ear of the medical officer will almost make the latter believe that his predecessor has been some heartless brute who has been maltreating the poor fellows; but let him order them "on duty," and he will see at the afternoon drill the crippled rheumatic of the morning the erect and active skirmisher of the afternoon.

These malingerers are often very ingenious. They understand very well what diseases can be "played," (as they term it,) and what cannot. As an instance of this I may give the following anecdote, which I have from indubitable authority.

"A Board of Medical Officers were examining patients for discharge. They were in a wall tent, and after a patient had been examined and sent out, the following conversation was overheard between him and a comrade:

"What did they do with you, Jim?"

"I don't know; they didn't seem to see it."

"What did you have?"

"Pain in the side; bad cough, and fluttering at the heart."

"Oh! — You might have known they'd find you out. All they've got to do is to thump you, (percussion,) and they know you lie. Why didn't you play rheumatism, carry a big cane, and howl like the — whenever you moved your leg? Then you'd have had them."

This is the generally received opinion among the old soldiers, and some of them do simulate rheumatism so artfully that it is indeed difficult, if not impossible, without a knowledge of the character of the man, to determine whether the case is genuine or spurious.

A man who has once made up his mind that he will "play for a discharge," will pertinaciously adhere to his story, and will suffer all sorts of punishment and take the most nauseous potions before he will "give in." Let me mention an example or two.

F. P., Co. B, 5th Excelsior, was a Frenchman

of some forty years of age. He had been in the Zouaves D'Afrique of the French service for fourteen years, and at the time he came under my notice he was a private in the regiment of which I was surgeon.

He presented himself at sick call while the regiment was in Maryland, complaining of rheumatism in the muscles of the back and one leg, and was not at first suspected. But as he took his medicine regularly, and as he got no better at all, my suspicion was aroused, and I made inquiries in his company from which I learned that he was by profession a juggler, or, as that class of performers now style themselves, a *prestidigitateur*—that his nights were spent in gambling, and that every thing tended to show that he was a malingerer.

At the next morning "call" I told him that I knew all about him—that his disease was all assumed, and I directed the orderly-sergeant to put him on duty.

He protested, begged and threatened in turn, but I was inexorable. He was compelled to go on duty, but he still persisted in his rheumatism and limped after the most approved fashion.

After a month's trial his captain requested me to try him again with medicine and see whether a somewhat active course of treatment would not bring him to terms. I accordingly tried active purgation, blisters, and low diet, but with no effect. The disease got worse instead of better, and he would wake up his comrades at night by his cries of pain; he would apparently writhe in agony, and the sweat would appear in great drops upon his brow. I watched him very narrowly and still adhered to my opinion. The officers of his company, however, feared I had been mistaken, and that he really was sick.

I cleared him out of the hospital and reported him for duty; but after trying various punishments without success, and after trying with alike ill success to get me to consider him sick, his company officers gave him up as a case beyond their power to manage, and he did about as he pleased, occasionally doing a little guard duty or helping around the cook tent.

On one occasion he came to me, and after apologizing in the Frenchiest style of polite obsequiousness for the trouble he had unavoidably given me, informed me that a vapor bath was the only thing that would cure him, as that had relieved him while in the French service after long years of suffering. If I would sign his discharge papers he would go to New York, get cured by a vapor bath and immediately re-enlist. I told him that there was no necessity for his doing that, as I would arrange to give him vapor baths in camp. With a sang-froid unimaginable he quickly replied, that that would never do, as

after the bath he must needs keep housed, and that a tent would not answer to stay in after the bath.

Shortly after this, and after he had been malingering for three or four months or more, I was one evening just about dusk coming out of a tent near the color line (where I had been to visit a patient "sick in quarters") and espied my troublesome rheumatic running at full speed across the parade ground.

A wagon with pies had been in camp and was about leaving, he wanted a pie and had halloed to the driver of the wagon in vain, when seeing no one observing him, he made a run for the wagon when he suddenly confronted me.

His game was up, and with the utmost nonchalance he repeated to his comrades how "Monsieur le Docteur" had surprised him. A few days after I asked him what tempted him to keep up the deception so long and endure so many punishments. Striking his pocket and jingling the gold, (for Government was then paying specie,) he laughingly replied in his broken English, to the effect, that when out of money he was very sick that he might spend his time in gambling, at which he was most expert, and from which he realized large sums.

After the battle of Fair Oaks he again commenced his malingering, but his former exposure prevented him from having much success. I recollect, however, on one fatiguing march he positively refused to go further, and the colonel tied him behind a wagon. He watched his chance, untied himself, and fell behind, and on the appearance of an ambulance went through his terrible contortions, was picked up by the ambulance driver, and when we halted for the night we found him quietly cooking his coffee, (the ambulance having passed us,) and as we rode in he saluted us (a quiet smile of triumph on his face) with a polite military salute and a pleasant "Bon jour, Messieurs."

I remember another case where I treated two men of one company for rheumatism for nearly a month. They would get better, and every rain-storm would make them worse. They shammed it so well and bore such a good name in their company, that I never suspected them. One morning, however, when they had been complaining of a severe relapse, my Hospital Steward observed them amusing themselves by jumping a ditch about six feet wide—and they suddenly convalesced.

A most remarkable case of feigned insanity occurred in a regiment under the charge of a friend of mine. A supposed insane man was kept in the regiment for several months and his every action carefully and closely watched. He would sit for

hours together on the color line or in the neighborhood of camp, with a pole, and imagine himself fishing. He was at length discharged, and when leaving his camp, one of his old company said to him: "Bill, what did you make such a d—d fool of yourself as to sit out in the sun all day pretending to be fishing." Pulling out his discharge papers he replied, with a quiet smile, "I was fishing for these papers."

[To be continued.]

DISEASES OF THE EYE.

Antagonistic Action Between Opium and Belladonna—Granular Lids.

Translated for the Medical and Surgical Reporter,

By A. METZ, M. D.,

Of Massillon, Ohio.

In the International Congress of Ophthalmology, in Paris, last October, GRAEFE made some remarks on the antagonism which is observed between opium and belladonna in their action on accommodation and upon the dimension of the pupil. GRAEFE said: "Works on general therapeutics, as well as the observation of oculopupillar phenomena, reveal a state of antagonism between the action of belladonna and opium, in a general point of view, as well as with reference to the dimensions of the pupil. If the belladonna and its alkaloid dilate the pupil, opium and its alkaloids it is well known will, on the contrary, cause contraction. The inquiry arises, whether this antagonism does not go further, and, after having exerted their influence on the iris, whether opium does not influence accommodation in a manner contrary to the action of belladonna. We have injected the salts of morphia in the cellular tissue in the ocular region, and we have noticed that the contraction of the pupil was not the only phenomenon produced in this circumstance. Accommodation was also affected; the patient could no longer see far; this apparent myopia was quite real, as concave glasses neutralized it. What was, in this case, the effect sustained by accommodation? In which case did it depend on spasm? In what other must it be attributed to paralysis?"

"A few reflections will enlighten us in this matter. It is known that on dividing the cervical fibres of the great sympathetic, the pupil contracts just as it does after the absorption of the salts of morphia. Now, on irritating the superior end of the cut fillet, the pupil enlarges as it does after the absorption of belladonna. If the same effects ought to be generally attributed to the same causes, we must then view the atropine as an active force which provokes contraction of the radiated fibres of the iris, and not paralysis of the circular fibres. Professor RUETZ has demonstrated that in paralysis atropia still acts. In extend-

ing the same mode of action of atropia to the apparatus of accommodation, we ought to think that it apparently paralyzes accommodation only by the irritation it produces on the sympathetic fillets of the tensor of the choroid. It is known that the ciliary apparatus, like the iris, has two direct sources of innervation, the one cerebro-spinal, the other sympathetic.

"The force which presides over active accommodation is derived from the cerebro-spinal system; the other, which holds under its control the tensor of the circular fibres, is the ganglionic system, and it is upon this last system on which opium and belladonna act with opposite effects, the former paralyzing them, and the latter exciting them. We must not lose sight of the fact that the contraction of the radiated fibres corresponds to relaxation of accommodation, as paralysis does to the maximum convexity of the lens.

"The tensor muscle of the choroid, like the iris, is composed of a crown of radiated fibres, implanted by their internal extremity upon a circle formed of circular fibres in the manner of sphincters.

"The radiated fibres, placed under the influence of the sympathetic, contract in both organs under the reflex action of the sympathetic, or by the action of belladonna. Opium, on the contrary, paralyzes them, as does the division of the superior fillet of the cervical ganglion, thus evincing the action of sphincters."

Granular Lids.

In the same Congress, Dr. ANAGNOSTAKIS, of Athens, (Greece) read a very interesting paper entitled "*Contributions historiques à la pathologie et à la thérapeutique des granulations palpébrales*," in which the learned doctor proves that notwithstanding the attention given by great minds of late years to the pathology and treatment of granular disease of the eyes, and that notwithstanding the general belief that great progress has been made in that direction, in reality very little has been gained since the days of HIPPOCRATES. Curiously enough, he proves by quotations that the popular pathological classification of granular disease of M. HAIMON differs but little from that given by AETIUS. According to the authority of GALEN, tannin was applied to the lids in the form of gall-nuts. HIPPOCRATES recommends local depletion, the excision of the granulations, general bleeding, and topical astringents, very similar to the popular treatment of the present day.

The tritoxide of iron, lead, escharotics, fine sulphate of copper, verdegis, oxyde of zinc, mercury, antimony, and arsenic, are among the remedies in common use among the ancients in the treatment of this disease.

The doctor claims that the history of the pathol-

ogy and treatment has not been sufficiently studied, and that *national honor* has impelled him to fill up this lacuna by the production he presented. He concludes by saying: "Permit me, gentlemen, to conclude my short *mémoire* by a parable. I know a man who abandoned the old house he had received by heritage, and at great expense erected a fashionable structure. 'My friend,' I told him, 'at least save a great expense by using the material of the old house in the construction of the new.'"

EDITORIAL DEPARTMENT.

Periscope.

FOREIGN.

On the Dignity of Ancient Pharmacy.

(Continued from p. 210.)

"Attalus, the last King of Pergamus, famous for his knowledge of metallurgy, was also well skilled in medicine and pharmacy. He invented several medicines which acquired great celebrity, and compounded poisons and antidotes, the effects of which he proved upon sentenced criminals. Our present ointment of white lead, and some other formulæ which have descended to us, are of his invention. Marcellus has preserved the following prescription which this prince used to prescribe for diseases of the liver and spleen, for dropsy, and for improving a lurid complexion. It consists of crocus, nardus, indicum, cassia, cinnamon, myrrha, schoeni flores et costus. These are to be made into a confection or electuary with honey, to be kept in a silver box. The King's knowledge of metals taught him that the medicine would be injured by any other readily procurable metal."

"Mithridates, King of Pontus, perhaps invented the celebrated antidote called 'confectio Mithridatis'; but he might have improved it only, for some ancient authors think that the worthless secret was communicated to him by the physician Zopyrus. This may have been the same Zopyrus who compounded an antidote against mortal poison, and against pain in the stomach, liver, or spleen, for Ptolemy, King of Egypt, probably Lathyrus; it consisted of costus, thus masculum, piper album, flores junci rotundi, cinnamomum, cassia, crocus, myrrha et nardus, made into an electuary with honey. It was named 'Ambrosia.' It is related that certain criminals having been compelled to swallow poison, some got the Mithridatic confection and recovered, while others who did not get it died. Avicenna seems to have believed that Mithridates composed his antidote with his own hands; at least we may judge so from the emphatic language which he uses. He says, 'Confectio Mithridatis nobilis est confectio quam fecit Mithridates rex Ponti, et nominavit suo nomine, et composuit ipsam.' The use of the words *fecit* and *composuit* in the same sentence seems emphatic. Mithridates dosed himself with this wonderful alexipharmic, but by constant use of it he became inconveniently poison-proof; for when he found it necessary to poison himself he could not, and was obliged to apply to a friend to stab him!

"Juba the Second, the amiable and accomplished king of Mauritania, wrote books on natural history

and on the virtue of herbs. Evax, a king of Arabia, wrote a book on medical botany, which he dedicated to Nero. Nero, himself, was a proficient in a branch of medicine which occasionally stood his friend. This imperial reprobate was in the habit of wandering about the streets of Rome at night in disguise, creating riots and committing all sorts of disturbances. He used on these occasions to get involved in pugilistic contests, during which he was often soundly thrashed, and seldom escaped without a black eye or two, and a face vying with the rainbow. Believing this was not a very reputable appearance for an emperor, he had the grace to keep by him in stock an ointment which he made of an acrimonious herb called thapsia, or deadly carrot, mixed with frankincense and wax. After these drubbings he smeared his face with his ointment, and next morning was quite free, as Pliny affirms, from all proofs of his well-merited punishment.

"Agrippa, King of the Jews, invented an ointment for debility of the nerves, which encumbered the Pharmacopœias of Europe until a few centuries ago. It bore his name, and so much did this narrow-minded monarch prize his secret, that he never could endure to communicate it to his subjects.

"The Emperor Adrian is said to have possessed considerable knowledge of medicine and pharmacy, and he also favored mankind with a royal antidote against all sorts of poison. It was called 'Adrianum,' and consisted of opium, henbane, euphorbium, and thirty-eight other ingredients of little power. The last royal medicine to which I shall allude, is one composed in the sixth century by the Emperor Justin, which continued in use for nearly one thousand years.

"The medical art was also understood and used for purposes which were not always the best, by princesses. From Diodorus Siculus we learn some historical facts, disguised in fable, it is true, but probably having reference to real persons and occurrences. Hecate, the daughter of Perseus, studied the compounding of poisons, and was the discoverer of aconite, or wolfsbane. She made trial of every composition by mixing them with the food which was given to strangers; for it was the custom to destroy all strangers that came to or were cast on the island. Being thus grown skilful in the art, this accomplished lady poisoned her father and usurped his crown. According to Diodorus she had two daughters, named Circe and Medea. Circe was much addicted to the compounding of all sorts of medicines; she discovered the efficacy of various roots and herbs; learned much from her well-practised mother, but much more by her own industry; so that, as Diodorus believed, she left nothing to be learned by any that came after her that could advance the art. She, imitating the example of her excellent mother, turned her skill to an equally good account, for she poisoned her husband and usurped his crown, but perpetrated so many cruelties on her subjects, that she was at length expelled the kingdom. Medea, however, turned her knowledge to humane purposes. (Diodor. Sic. cap. iii.)

"Cleopatra, Queen of Egypt, wrote treatises on medicine, especially on the diseases of women. She made extensive experiments on poisons, and contrived various cosmetics, which in her own case she turned to good account.

"Besides crowned heads, the profession of medicine enumerates in its lists some of the most eminent philosophers of antiquity, who also invented and compounded remedies. Pythagoras and Democritus travelled all over Persia, Arabia, Ethiopia, and Egypt, and had conferred with the sages and learned persons called Magi; the great knowledge of medicine thus acquired they each presented to the world in the form of a book. Both of them publicly professed magic, but kept its mysteries secret. Pythagoras was certainly an extraordinary character; en-

dowed with qualifications of the highest order, personal and mental, he commanded admiration and respect whenever he appeared. He was a celebrated wrestler, then a popular accomplishment, and was skilled in oratory, rhetoric, poetry, music, and philosophy. On his return from his travels, he settled at Crotona, in Magna Græcia, where he founded a school, as well as a new sect of philosophers. His celebrated doctrine relative to transmigration, he, in all probability, purloined from the Egyptian priests; but it is certain that he supported it in a manner which he himself must have known to be false. He pretended that the soul of his deceased friend, Calliphon, conversed with him night and day, and gave him the important advice not to pass over a place where an ass had fallen down. On the whole, one would be disposed to consider this celebrated character as a highly talented and successful impostor. The following specimen of his pharmacy may be interesting. It was famed under the name of 'Antidotum Pythagoras;' and we are informed that the great philosopher, having proved its efficacy, prescribed it for such of his dear friends as labored under stomach complaints, in all kinds of which it is affirmed to be successful. 'Recipe: Iridos drachmas octodecim et scrupulos duos; gentiane drachmas quinque; zingiberis drachmas quatuor cum semisse; melano-piperis drachmas quatuor; mellis q.s. Detur in modum nucis.' Pythagoras also invented vinegar of squill; but the medicinal use of the squill was taught him by Epimenides.

"Empedocles of Agrigentum, a philosopher and an eminent poet, was celebrated for his knowledge of medicine. Of such consideration was he amongst his countrymen for his talents and social virtues, that they offered him the crown, but this proof of their affection he had the magnanimity to refuse. He was a believer in a modified doctrine of transmigration; according to his own account he had been a girl, a shrub, a fish, and finally a philosopher. Could he have sincerely believed this?

"Democritus, who had travelled to the same countries as Pythagoras in search of knowledge, seems to have been an equally eccentric genius; and such were his peculiarities that he was at one time supposed to be mad. He seems to have had a taste for chemistry; for he found solvents for different stones, made artificial gems and colored them with metallic oxides, and invented an atomic hypothesis, which, however, had little resemblance to that at present known. The following is one of his prescriptions; it does not evince much skill in the selection of remedies:—Take the spinal marrow of a hyæna, mix it with his gall and some old oil, and boil them all together. It was employed for all pains of the nerves. (Marcellus.) In the book written after his travels, he has given a prescription which inevitably leaves him in the dilemma of being accounted either a most credulous fool or a consummate knave. It is a composition which enables a man to have handsome, virtuous, and fortunate children. (Pliny.) Miserably for the votaries of beauty, the prescription is lost. The characteristics of the ancient physicians is the attributing of inordinate powers and too many virtues to inconsiderable remedies. Chrysippus and Diogenes each wrote a book, wonderful to say, on the medical virtues of cabbage. (Pliny, Galen.)

"I shall give but two or three more instances of illustrious persons of ancient times who occupied themselves with the practice of pharmacy. The prophet Esdras, while in exile at Babylon, amused himself with compounding a medicine of his invention, which, up to a few centuries since, retained a place in the pharmacopœias of Europe. It consisted of no less than a hundred and fifty ingredients, and one of these consisted of forty; out of which number the prophet calculated that one at least should be capable of curing. He might have shortened his prescription and his labors by directing a little of all

the medicines known in the world at that time to be mixed together. Those who wish to compound this polychrest formula of one hundred and ninety ingredients, will find it in full detail in the work of Nicolaus Præpositus.

"It is not perhaps generally known that St. Paul was an amateur in physic; yet Nicolaus Præpositus gives a formula which he calls *Potio Sancti Pauli*, and which, he says, was invented by that learned apostle. It is the same heterogeneous medley as all the medical prescriptions of that age. St. Luke, as is well known, was a physician; but I have not been able to gain any insight into his practice.

"On consideration of this list of emperors, princesses, philosophers, physicians-royal, prophets, and saints, who have in different ages of the world pursued the knowledge of medicine combined with pharmacy, we cannot fail to be struck with the antiquity and grandeur of the art, as it was then practised—a noble art cultivated for its own sake, without fee, but not without reward—as a branch of philosophy, and as an element of liberal education.—*Dublin Medical Press.*

DOMESTIC.

On the Arrest of the Secretion of Milk.

Mrs. F., æt 30, has had five children, and has been several times troubled with indurated breasts after labor. She was delivered by a midwife on the first of May inst., of a still-born child. I was consulted twelve hours after her accouchement, on account of some imaginary abnormal sensations, and put her at once on five-grain doses of iodide of potassium every four hours, directing frequent frictions of camphorated oil to the breasts, and keeping them covered with cotton batting and bandaged tightly, hoping by this means to prevent the formation of milk; this caused her some pain in them for twenty-four hours, when it gradually subsided. Had I commenced the treatment a little sooner, I feel confident it would have succeeded, as the quantity secreted on the setting in of the milk fever, was extremely small; to disperse it, I now conjoined with the iodide of potassium, half-drachm doses of the wine of colchicum, continuing the local application of camphor and the bandaging, and giving directions to take away a little of the milk, should the breasts become painful. They were slightly drawn twice, and in two days after the commencement of the colchicum (four days after confinement) I found the mammary gland flat, indurated and without milk. In twenty-four hours after this, I was compelled to suspend the use of the remedy, on account of its purgative action on the bowels, and now trusted to the camphorated oil alone to remove the induration, which it did completely in about a week. The breasts remain much smaller than natural, and the areolæ are of a dark brown color, and papillæ much enlarged. She says she has not had any trouble with her breasts since the first day, and denies feeling the least uneasiness in them. She finds, however, that she is not gaining her strength as fast as usual this time.

Dr. LOCOCK remarks that the ill health that follows the artificial arrest of milk, is best relieved by laxatives; these I had found necessary to give a few days since, notwithstanding her pale anæmic appearance, as the costiveness with which she had been troubled seemed to be one of the causes of the excessive flow and continued red color of her lochia. She is now on the citrate of iron and quinine, and improving daily.

Extract of Belladonna: To Dr. R. H. GOOLDEN, of St. Thomas' Hospital, the profession is indebted for again bringing into notice the extract of belladonna, as an application to the breasts for the arrest of the secretion of milk. He merely applies it to the areolæ.

Colchicum internally: And having noticed that cows

eating the colchicum plant in pastures, immediately became dry, he thought of trying the wine of colchicum, in half-drachm doses, at the same time that he was applying the extract of belladonna to the nipples; and in one case, where the breasts were very tumid, tender, painful and hard, within two hours they became perfectly relieved, the milk greatly absorbed, and what is very important, there was no fever or other inconvenience attending the sudden suppression of the milk.

Dr. BURROWS, of Liverpool, who likewise has been very successful with the belladonna, gives conjointly with the colchicum, drachm doses of epsom salts, repeating the mixture every four hours; and finds that in thirty-six hours, the swollen, hard, tender and red breast becomes cool, pale and flaccid, being finally reduced smaller even than before pregnancy.

Dr. E. U. BERRY, of Covent Garden, mentions two cases where in place of arresting the secretion, the belladonna seemed to merely relax the mouths of the lactiferous tubes, and give relief to the inflamed breasts by causing the milk to flow freely away into a bread poultice, and the suckling was continued afterwards. May it not have been the action of the poultice that produced this effect?

The belladonna does not seem to affect the milk in the breast, and the child may be applied at any time, after washing the nipples carefully.

Dr. A. K. Gardner, of New York, applies a plaster of extract of belladonna spread on kid, and leaves a hole for the nipple when it is desired to remove swelling and decrease the quantity of milk, and the child is allowed to suck without disturbing it.

Camphor: Dr. HARRIS, of Savannah, who has had much experience, prefers camphor to belladonna, and mixes it with glycerine; and we have long been in the habit of checking a too excessive flow of milk by frictions of camphorated oil, which have never seemed to affect the child in any way, although kept constantly at the breast.

Iodide of Potassium: This salt has been strongly recommended by some French and German practitioners. Professor M. ROUSSEL, of Bordeaux, who has employed it in twenty cases of painful engorgement of the breast, finds that the iodide removes it generally in three days, and that the milk will return if desired, by discontinuing the remedy as soon as relief has been obtained: and farther, that six or eight grains in the twenty-fours, taken in divided doses, has proved more successful in his hands than when given in larger doses.

Dr. GAILLARD THOMAS applies the belladonna, and gives large doses of the iodide of potassium internally.

Tobacco: Tobacco ointment made by boiling an ounce of fresh tobacco in a pound of lard, is said to act similar to extract belladonna, and never to produce constitutional effects when applied to the breasts.

Sage: Taken in strong infusion, long since recommended by VAN SWEITEN, has often been resorted to with success to arrest the flow of milk.—*Canada Lancet*.

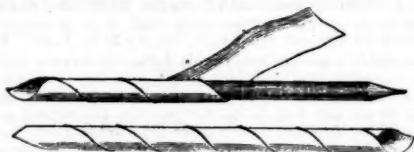
Medicated Cigarettes.

Cigarettes may be made of almost any variety of thick paper, but that kind should be selected that on burning yields a smoke most easily inhaled. I have always employed the heavy paper used for copy-book covers (olive pressings); thick blotting paper, however, makes a good cigarette, but the regular filtering paper does not answer as its smoke is dense and suffocating.

First, cut the paper into strips about seven inches long and an inch and a quarter wide, and next ascertain exactly how much fluid it requires to saturate twenty-five of these pieces. This is readily done by soaking them in an exactly measured ounce of water,

when, on withdrawal, it will be found that about five fluid drachms of the liquid has been imbibed; this will give the key to the strength you are to make the solutions.

Next, saturate the slips with the remedy, and when nearly dry, gum or paste one border of each, and roll it around a pencil as shown in the following wood cut, afterwards withdraw the pencil, and the cigarette is made.



Arsenical Cigarettes.—Boil twenty-five grains of arsenious acid (the lump broken up is purest) in a Florence flask with four ounces of water down to the quantity required to saturate one hundred slips of the paper previous to rolling. They will then contain a quarter of a grain each. If you have not the usual apparatus, hang the flask above some live coals by means of a wire.

Mercurial Cigarettes.—Dissolve three drachms of red precipitate in three drachms of nitric acid, and add enough water to make up the quantity requisite to saturate one hundred slips of paper. They will contain about three grains of the nitrate of mercury.

Nitre Cigarettes.—Dip the paper in a saturated solution of the nitrate of potash before rolling.

Balsamic Cigarettes are made by giving the dried nitre cigarettes a coating of tincture of benzoin.

In the *British Medical Journal*, Dr. NEVINS, of the Royal Infirmary School of Medicine, Liverpool, speaks highly of these cigarettes in a number of cases.

Aphonia.—A patient who could not speak above a whisper for over a year, probably due to the thickened condition of the chordæ vocales, as she had no pain or constitutional symptoms, used the mercurial cigarettes for a month, and perfectly recovered.

Offensive Discharges from the Nostrils.—With a sense of uneasiness in the frontal sinuses, was quite cured in about a month with the mercurial cigarettes. The patient held his nose after taking a mouthful of the smoke, and then forced it into his nostrils in the manner practiced by accomplished smokers.

Polypus in the Nose.—A patient who had been twice operated upon for polypus, is now able to keep the disposition to form fresh polypi in check by smoking the mercurial cigarette in the same manner when he feels that uneasiness which warns him of the danger of its recurrence.

Deafness.—When dependant upon an obstructed Eustachian tube, he finds the nitre cigarettes, made with brown paper, most successful, and that the smoke forced into the tympanum from the throat, gradually restores the sense of hearing. The circumstance which first led him to adopt this method, was hearing a deaf person on one occasion remark, that when he was sneezing the day before, he heard perfectly; the violent effort appeared for the moment to have dilated the Eustachian tube, and hearing was the result. He says, that in a deafness of seven years standing, he had benefitted a patient more by this treatment than by any other.

Phthisis.—TROUSSEAU long ago recommended a puff or two of an arsenical cigarette twice or three times a day in phthisis.

When the attention of the profession has been duly aroused to this subject, there will doubtless be found many other affections in which medicated cigarettes may be advantageously employed, as in syphilitic ulcerations of the throat, ozæna, offensive breath, obstruction of the lachrymal duct, diphtheria, &c., &c.—*Canada Lancet*.

MEDICAL AND SURGICAL REPORTER.

PHILADELPHIA, AUGUST 15, 1863.

OUR SURGEON-GENERAL ABROAD.

One effect of the Surgeon-General's order striking calomel and tartar emetic from the supply table of the U. S. A., is the license it gives to medical journals abroad to depreciate the medical service of our country. If, however, our own Surgeon-General could cast so foul a slander on the Surgeons in the army, and on the profession of the country as is implied in his Order No. 6, it will become us to receive with becoming meekness the lectures and admonitions of the foreign press. And past experience, and particularly the experience of the two years in which our unfortunate civil war has been in progress, shows what we generally have to expect from the foreign press when a seeming advantage is gained. To the London newsboy's cry, "Good news—General Lee's army in Pennsylvania!" is now virtually added in the medical journals, "Good news—Surgeon-General HAMMOND admits the inferiority of the American medical profession!"

The untruthful statements in the Surgeon-General's uncalled for order are calculated to do us much injury in the eyes of the profession abroad. It is not to be denied that some ignorant and incompetent surgeons have been appointed into the army. It was the Surgeon-General's business to weed out such, and put competent men in their places, rather than issue an order which virtually places them all in the category of quacks and impostors.

We can assure our cotemporaries abroad that the Surgeon-General's orders bearing on this subject, place our profession in a *false light*. Taken as a whole, there never was an army more ably served than the United States army is. Ignorance and pretension are to be found, but they are the exception and not the rule. Calomel and tartar emetic, so far from being abused in "innumerable instances," have, there is irrefragible testimony to prove, been *very seldom* abused. Our greatest incompetent, our foreign cotemporaries may rest assured, is our Surgeon-General himself, who never was a practical surgeon, but a mere experimenter in physiology, who, having

some narrow ideas himself on some modes of practice, and being under the influence of some unprofessional friends who entertain sentimental and infinitesimal notions on the practice of medicine, does not hesitate to issue an untruthful order which is slanderous to every surgeon in the army. As to defences of the order by cotemporary medical journals, or men in this country, so far as we know, they are merely tubs to catch the whale, and have no real significance or weight.

One of our foreign exchanges speaks of the American medical journals having been remarkably barren of authentic and reliable hospital reports, and says that the true condition of the troops appears to have been carefully concealed. The Surgeon-General's orders are then quoted as an evidence why this has been done. The inference seems to our cotemporary a fair one, that the ignorance and bad management of the surgical staff of the army has been so disgraceful, that the facts were withheld by the press, until finally the head of the Army Medical Department was compelled "only in dire necessity," to issue his order taking from the profession the "edged tools" with which such a vast amount of harm is being done!

It is too true, that the American medical journals are remarkably barren of authentic and reliable reports from the military hospitals, but our cotemporary draws an entirely wrong inference from that fact. We will tell him why it is. "The head of the Army Medical Department" is collecting material for a Surgical History of the War, and army surgeons have been discouraged from publishing cases that have occurred under their observation, lest it should detract from the freshness and originality of the contemplated work. Surgeons are ordered to report their cases to the bureau at Washington, hence they do not get into the medical journals. Such exclusiveness is not in accordance with the spirit that should characterize the medical profession. In spite, however, of this spirit of exclusiveness, very interesting articles are published from time to time in our pages, from Surgeons in the United States hospital and field service. We know, too, that material is accumulating, which will ultimately see the light, in spite of the baneful influences which now surround the Surgeon-General's office.

OUT OF TOWN.

It is fortunate for the dwellers in our large cities that the sea-shore, the mountains and mineral springs are easy of access during the hot months of the year; and, we think it is particularly fortunate this year, when an unusual amount of wet weather has been succeeded by very great heat. To have our city population all remain at home under such circumstances, would be to run the certain risk of much sickness and a high rate of mortality. The few weeks, or even days, spent at the sea-side or among the mountains at this season of the year, has a very important influence upon our city population in a hygienic point of view.

Many thousands of the population of our large cities are to be found at this season of the year at the various sea-side resorts, Cape May, Atlantic City, Long Branch, Coney Island, Rockaway, Newport, Nahant, and elsewhere; at Saratoga, Bedford and other mineral springs; at such mountain resorts as the White, Catskill and Alleghany Mountains, while many more spend the hot months in travelling in Europe, to the Canadian provinces, or anywhere in search of that staple of existence "pure fresh air."

Any one who witnesses the thousands of visitors to these various resorts, cannot fail to be impressed with the fact, that their absence from the pent up Uticas of the land must have a great influence in diminishing their mortality records. For despite the great diminution in population in the cities during the summer months, the increase in the mortality is frightful, as the following comparison between the number of deaths in the cities of Philadelphia, New York and Boston, for the weeks ending on or about the 1st of February and August, respectively, will show:

	Week ending Jan. 31, 1863.	Week ending Aug. 8, 1863.
Philadelphia.....	253.....	568
New York	423.....	970
Boston	71.....	180

In view of the beneficial influence on health, of an absence from the impure air of cities during the hot months, our profession should encourage the families over whom they have any influence to spend as much of their time as possible out of town. Those who cannot afford to travel or go to places of fashionable resort, can go to some quiet

place in the country and board, or, they can at least avail themselves of the numerous avenues of exit from our cities where even small doses, as it were, of pure air may be taken every day or two. Many an infant's life is saved by taking them on daily trips on our ferry-boats or railway cars to the country, where their lungs may be expanded by air that is not loaded with the foul exhalations from our filthy streets, alleys and gutter-ways—and the often fouler air of the crowded and ill-ventilated tenements of the poor.

Private enterprise is throwing open to the population of our cities, at very small cost, many places of resort. From this city such popular places of sea-side resort as Cape May and Atlantic City are readily reached by rail, and means of accommodating visitors are in the main excellent. We would suggest that a little liberality toward our profession on the part of the corporators of our railways and the proprietors of sea-side and other resorts, might have a favorable reactionary effect. Physicians are about the hardest worked and the best abused class of the community, and the brief time that they can get to spend out of town should, when they are engaged in the active duties of their profession, be as nearly as possible free of cost to them.

Notes and Comments.

Great Mortality in New York.

The fearful number of *nine hundred and seventy deaths* were reported by the City Inspector, as having occurred in New York during the past week. This is an increase over the previous week of *two hundred and forty-eight*, and over the same period last year of *four hundred and two*! The deaths caused by the excessive heat reach the startling number of *one hundred and thirty-four*. Of the entire number five hundred and thirty-eight were children under five years of age.

Physicians wanted in Norfolk.

The following, taken from the *Norfolk Virginian*, bears us out in the remarks we made on pages 435-6 of the last volume in regard to the prospective demand for physicians in the South:

"We are requested, by the Mayor of Norfolk, to say that several physicians are wanted in this city, and can obtain immediately a good practice. The old physicians being required by an act of the

Legislature of Virginia to take the oath of allegiance to the United States Government, refuse to do so generally, and consequently there is but one doctor in the city qualified to practice.

"Loyalty and regular diploma are the qualifications required. Apply to

"W. H. Brooks,

"Mayor of Norfolk, Va."

Correspondence.

FOREIGN.

LETTER FROM W. N. COTE, M. D.

GENEVA, June 25th, 1863.

[Continued from page 210.]

Typhus Fever.

Dr. LOMBARD, of this city, member of many Medical Societies, and for many years chief physician to the Geneva Hospital, publishes some observations suggested by a comparison of the post-mortem appearances produced by typhus fever in Dublin, Paris, and Geneva. You are well aware of the different views entertained in France and England on this important subject. On the one hand the French pathologists and most writers, such as LOUIS, and others, have described the continued fever named typhus, as being always attended by a certain pathological state of the intestinal canal, which begins with swelling and enlargement of the follicular glands, situated in the lower third of the ilium, and forming the oval patches termed *glandule Peyeriana*. This process is, according to them, a constant attendant on typhus, and in fatal cases always ends in ulceration of the mucous membrane. The English pathologists, on the other hand, have stated that although they do usually meet with the state of mucous membrane described by LOUIS, yet they do not consider it as being an essential accompaniment of fever, and they maintain that fever of a continued and typhous character, is not necessarily connected with any particular morbid appearance or change in the intestinal canal.

Dr. LOMBARD after calling attention to the fact that he has been engaged for more than six years in close attention to this subject, and that he has seen a great number of fatal examples of typhus fever dissected, states that never in a single instance has he missed finding the peculiar state of the intestinal canal above referred to. The post-mortem appearances both in Paris and in Geneva, lead to the same results, whilst in Scotland, Ireland, and England, not a single trace of this morbid change can be found in any part of the intestinal canal, save some redness and softness of the mucous membrane of the stomach, which may be produced by inflammation, but more probably is owing to vascular congestion, occurring during the last stage of the disease, or even during the agony which precedes death.

As for the external appearances they are most undoubtedly the same: there is the same headache,

pain in the loins, prostration of strength; the same pulse, hot and burning skin; the same depressed tongue, and in the latter stage of the disease, the same tendency to the formation of bed sores, and to involuntary discharges of stools. The same pulmonary and cerebral complications take place in both fevers, and bronchitis, pneumonia, determination of the blood to the head, and arachnitis, or at least engorgement of the meninges, occur in both.

Having said wherein consists the general similarity, Dr. LOMBARD next points out some of the most obvious differences. In the first place, then the papule or measles-like eruption which is always found in our continental typhus, but which never acquires any great extent or importance, is here most remarkable, both in appearance and in quantity, for cases are seen where is found a rash quite as diffused as that which distinguishes exanthematous diseases properly so called, and not dissimilar to the papular blotches which cover the skin at the first appearance of the eruption of confluent small-pox. Again, in the English fever, this rash is in bad cases mixed with true petechiæ, and in many of the very malignant ones with purple blotches or *vibices*, an occurrence very rare on the continent.

Another circumstance, is the occurrence of fever in infants and old people. In the English hospitals can be seen cases of fever attacking persons who have passed sixty, seventy, or even eighty years of age, and which exhibit the very same appearance, the same typhoid symptoms, and the same eruptions that are observed in young and middle aged adults. This observation applies also to infants, for it is reported that infants at the breast, often catch fever in Great Britain, a circumstance never witnessed in France or Switzerland.

Another symptom which must be considered as constituting a difference, is diarrhœa, which is much less frequent, both before and during typhus fevers in Great Britain, than it is in either Paris or Geneva. In general it seems that in the former country, the abdominal symptoms are less intense and of less importance than in Europe. Another difference Dr. LOMBARD points out, is the highly contagious nature of the fever in the British Isles, compared with that of the continent. No doubt the continued fever observed in France and Europe is contagious—there are undeniable proofs of its transmission by contagion—but yet its transmissibility from one person to another, is far less common here than in Great Britain. Here the attendants on the sick are seldom attacked, whereas in England the hospital nurses scarcely ever escape. In Paris the students who visit the fever wards, the clinical clerks who take the cases, and the physicians who attend them are not liable to this disease in a greater ratio, or at all events in a much greater ratio, than other persons residing in the same city, and unconnected with any hospital. In Great Britain, on the contrary, the very reverse happens, and it is rare to meet an individual of any of these classes, who has escaped being attacked with typhus. So far then the typhus on the continent differs as to the intensity of its

contagion from that endemic in Glasgow and Dublin. In one remarkable point, however, they agree, the fact that *no one is known, or at least very rarely, to have the eruptive typhus twice*. A person once attacked with typhus, attended with the measles-like eruption may safely calculate upon immunity from this disease for the future, a circumstance which, as has been well remarked by a Glasgow physician, stamps upon typhus one of the distinguishing marks or characteristics of the exanthemata.

Dr. LOMBARD attaches much importance to so striking a difference as the constant existence of a certain morbid state of the intestines in one case, and its comparative rare occurrence in the others. A difference the more remarkable, as being unaccompanied by any corresponding difference in the general or external symptoms. Some difference does exist between the symptoms of English and continental typhus—but then they are comparatively trifling, and not at all proportioned to the difference that ought to exist, if the state of the alimentary canal plays so important a part in producing these symptoms, as the continental physicians have been in the habit of believing. The question here naturally occurs, whether the two diseases are different or the same. Our author cannot allow that they are specifically distinct, and consequently he is almost forced to give up the opinion that the local changes of structure are of paramount importance in causing or producing the symptoms that accompany this type of fever. If they are of the importance which many assert, and if the state of the mucous membrane of the intestine, more particularly if the inflammation of Peyer's glands, and their subsequent ulceration, are the chief or the sole cause of the chain of symptoms observed in French typhus, how comes it that the very same set of symptoms occur in Great Britain, where post-mortem investigations place it beyond all doubt that their cause does not reside in a morbid state of the mucous membrane or of Peyer's glands.

All these considerations lead our author to the conclusion, that typhus fever is more a general disease affecting the whole constitution, than a malady depending on any local inflammation, or any local change of structure. Various causes serve to impress upon this general disease a tendency to associate itself with, and produce various local ailments, among these causes the most influential probably are, climate, seasons, the race of mankind, diet, and various circumstances, which act powerfully both on the mind and body, and which, when concentrated on any one point of time, have given rise to those epidemics of typhus that have so frequently devastated the different countries of Europe. This view of the subject must evidently lead to important practical results, for it will, in the first place, make us cautious in applying the treatment applicable in one European country to the typhus of another, for in the latter, local symptoms may exist that render that treatment inapplicable. Thus the system of active purgation might be pursued with less injury in Glasgow or Dublin, than in Paris or Geneva, where the peculiar proneness of the follicular glands to run into ulceration renders the irritation of purgatives a more serious matter.

DOMESTIC.

SALIVARY CALCULUS.

WHEELING, WEST VIRGINIA, }
Aug., 1863.

In the month of October, 1860, I extracted the enclosed specimen of salivary calculus. It occupied an excretory duct of the sublingual gland under the right side of the tongue. The accompanying cut



represents the calculus, full size.

The subject, æt. thirty-eight, was G. McD., of Beallsville, Monroe county, Ohio. At the time I was consulted and extracted the calculus, the tumor had existed over two years, and was the size of an ordinary almond. After subsidence of a severe inflammation of the throat, complicated with external swelling, which was followed by ulceration of the mouth and tongue, the tumor first attracted attention. The patient never suffered severe pain in the tumor, but when under the influence of cold he often experienced an "unpleasant cramping sensation," also, occasionally, lancinating pain.

During the interval of two years referred to, he could not discover much increase in the size of the tumor, except when under the influence of cold, at which time it became inflamed and enlarged. Pressing the side of the tongue upward, the tumor constantly interfered with the free use of that organ, which inconvenience was greatly increased when the tumor was inflamed.

For about six weeks after the discovery of the tumor, ineffectual efforts were made to reduce the "morbid growth" by means of caustics, and from that time till it came under my care the use of remedies was abandoned. Patient writes me, "I often felt uneasy on account of the tumor, fearing it might be of the nature of a cancer, and I was very much surprised when, upon examining, you told me there was something confined there that should be removed."

* * * I have been entirely relieved and discover no appearance of its return."

JOHN C. HUPP, M. D.

Army and Navy News.

Changes.

Dr. H. V. DAYTON, Assistant Surgeon of the First New Jersey Cavalry, has been appointed Surgeon of the Second New Jersey Cavalry Regiment which is now being filled up by volunteers.

Surgeon J. M. FOLTZ, detached as Fleet Surgeon of the West Gulf blockading squadron and waiting orders.

Assistant Surgeon Wm. LONGSHAW, detached from the Penobscot and ordered to the Lehigh.

Resignation.

Dr. PERLEY, Medical Inspector-General of the United States Army, has resigned his position as Medical Inspector, and Dr. BARNES has been appointed his successor.

Some time since serious charges were preferred against Dr. PERLEY, among them that of signing soldiers' discharges in blank. A Court of Inquiry was ordered to investigate the charges, but before any progress was made Dr. PERLEY resigned.

Ordered Before the Retiring Board.

Surgeons J. J. B. WRIGHT and BURTON RANDALL have been ordered before the Retiring Board now in session at Wilmington, Del.

List of Hospitals in the District of Columbia and their Locations.

Armory Square hospital, Seventh street west, between C and D south.

Carver hospital, Fourteenth street west, at terminus of City railroad.

Columbian hospital, Fourteenth street west, at terminus of City railroad.

Campbell hospital, Seventh street west, at terminus of City railroad north.

Douglas hospital, corner of I street and New Jersey avenue.

Eckington hospital, on Gales's farm, northeast of city.

Emory hospital, near Alms House, east of the Capitol.

Finley hospital, Kendall Green, Fourth street, northeast of city.

Harewood hospital, Corcoran's farm, Seventh street west.

Judiciary Square hospital, Judiciary Square, Louisiana avenue.

Kalorama (small-pox) hospital, Rock creek, out Twenty-second street.

Lincoln hospital, one mile east of Capitol.

Mount Pleasant hospital, Fourteenth street, beyond Carver hospital.

Seminary hospital, (Georgetown,) corner of Gay and Green streets.

Stone hospital, Fourteenth street, near Columbian hospital.

St. Elizabeth hospital, (Insane Asylum,) beyond Navy Yard west.

St. Aloysius hospital, (Swampoodle,) North Capitol and K streets.

Stanton hospital, I and New Jersey avenue.

Weekly Report of the Army Hospitals in Philadelphia.

The following is the report of the Government Hospitals for the week ending with Saturday, Aug. 8th:—

HOSPITALS.	Tot. No. beds for patients.	Admitted.	Return'd to duty.	Transferred.	Discharged.	Died.	Remaining.
Chestnut Hill.....	3100	17	46	158	9	3	2242
Filbert Street.....	430	102	86	.....	3	3	247
West Philadelphia.....	3933	5	78	275	5	7	3360
Chester.....	.....	955	.....	.....	13	11	125
Christian Street.....	230	14	4	4	.....	.....	256
Turner's Lane.....	293	6	21	19	2	2	242
Germantown.....	685	3	29	26	4	.....	147
Summit House.....	550	1	.....	20	2	2	513
Nicetown.....	1080	7	3	55	1	.....	970
Broad and Cherry Sts.	700	22	1	27	3	3	657
South Street.....	253	7	1	16	2	2	258
Sixty-fifth and Vine...	200	2	.....	1	.....	.....	147
Broad and Prime Sts..	250	.....	.....	.....	.....	.....	67
Islington Lane.....	60	.....	.....	.....	.....	.....	7
Camp Whipple.....	49	14	10	.....	.....	.....	4

News and Miscellany.

Pension Examining Surgeons.

Maine.—Drs. JOHN N. HOUGHTON, Phillips; MOSES S. WILSON, Lincoln; EDWARD N. MAYN, Houlton; STEPHEN WHITMORE, Gardiner; NATHANIEL PEASE, Bridgeton.

New Hampshire.—Drs. R. P. J. TENNY, Pittsfield; W. H. GRANT, Farnsworth.

Vermont.—Dr. NORMAN W. BRALEY, Chelsea.

Maryland.—Dr. THOS. H. OWING, Baltimore.

Illinois.—Drs. EDWARD J. TICKNOR, Newton; E. E. WALBORN, Mt. Vernon.

Coal Tar.

This is a very complicated substance, but of constantly increasing value in the arts. When carefully distilled, it yields certain volatile fluids, smelling more or less of tar, among which is a naptha called benzole. Small bottles of this benzole are sold for removing grease stains, under the name of "benzine collas." Benzole is next acted on by nitric acid, and by that means changed into nitro benzole, a liquid having so exactly the smell of the essential oil of bitter almonds, that it is substituted for it in the manufacture of almond soaps and of cheap perfumery. When iron filings and acetic acid act upon the nitric benzole it is changed into aniline, and this aniline when acted on by arsenic acid and some other chemicals, yields a great variety of very beautiful colors, which are coming into extensive use. These coal tar dyes formed quite a notable feature of the London exhibition. In one case was shown a cylinder of solid aniline purple, which could easily be carried under the arm. It is valued at four thousand dollars, and required for its production the tar obtained from two thousand tons of coal.

Resignation of Prof. H. H. Childs.

At a meeting of the Trustees of the Berkshire Medical College, held recently, HENRY H. CHILDS, M. D., the President of the Institution, as well as its founder and father, resigned the Professorship of "Obstetrics and the Diseases of Women and Children," which he has held so many years. Dr. CHILDS' advanced age rendered it necessary that he should seek some relief—although a hale and hearty old age is his, which we trust will enable him to hold for years the Presidency of the College, which he still retains. In accepting the resignation the Board adopted unanimously the following resolutions:

Resolved, That the resignation of Dr. CHILDS requires from us more than a passing notice. For nearly forty years he has been the active head of the Berkshire Medical College—his usefulness having extended to a period almost unprecedented. During these years, by his energy, zeal and enthusiasm, he has achieved a wide-spread reputation as a medical man, and by his kindness of heart and courtesy of manner, a no less deserved name as a Christian gentleman. He has ever maintained a high standard of medical honor, and his pupils must forget to ignore his teachings before they could stoop to anything ignoble or ungenerous. With a quick appreciation of merit, however modest, and ever ready with the kindly word of needed encouragement, his pupils learned to love him, and thousands, through the length and breadth of our land, affectionately look back to him as a kindly foster-father.

While we regret the infirmities which compel the retirement of our venerable President, as an active instructor, we earnestly hope that his interest in the institution, which is so identified with his life and name, may not abate, and that he may long be spared

to speak words of cheer to the new generation of students, and to give the benefit of his advice and counsel to the Faculty and Trustees.

The Difference between Man and Ape.

At a recent ordinary meeting of the Anthropological Society, (London, Eng.,) a discussion took place on the above named subject after the reading of a paper "On the Brain of a Microcephalic Female Idiot." Professor OWEN observed that as the brain of man is more complex in its organization than the brain of inferior animals it is more subject to injury, and more liable to experience the want of perfect development. Instances of idiocy occur among all races of mankind. Extreme smallness of the skull indicates in all cases want of intellect approaching to idiocy. Alluding to the attempts that have been made to find a link of connection between man and apes, he remarked that it was possible that an idiot with an imperfectly developed brain might wander into some cave and there die, and in two or three hundred years his bones might be covered with mud, or be imbedded in stalagmite, and when discovered, such a skull might be adduced as affording the looked for link connecting man with the inferior animals; but the brain of such an idiot as the female whose skull is exhibited is distinctly different from that of the anthropoid apes; and he expressed an opinion that the difference is too wide to be bridged over by the skull of any creature yet discovered.

ANSWERS TO CORRESPONDENTS.

Correspondents will please notice our reiterated request to give their full address in their communications to us. Our correspondence is very extensive, and it is necessary for us always to know the Town, County and State from whence their letters are sent.

Dr. W. M. L., Ohio.—The price of the best articulated skeletons is now \$30 to \$35. The increased cost of ether, which is used in bleaching the bones, has added somewhat to the cost of the skeletons.

Dr. B. J. P., N. Y.—Only a small number of medical cadets is appointed in the U. S. Army. The pay of a regular cadet is \$30 a month, rations and transportation being found by the Government. Application must be made by letter to the Secretary of War, at Washington, who will give all needed information. Excellent opportunities are afforded for acquiring a practical knowledge of many of the minor operations in surgery, and of witnessing the larger operations and the treatment of surgical cases.

MARRIED.

CLARK—CLARK.—In Boston, Mass., on the 11th inst. Rev. Edward L. Clark and Miss Susan G. P., daughter of Dr. Henry G. Clark, of Boston.

CUTTER—TROW.—On Wednesday, Aug. 12, at the residence of the bride's parents, by Rev. Milton Badger, D. D., Dr. Jas. B. Cutter, U. S. A., and Miss Kittie S. Trow, being of the same age and name and married on the same day of the month and by the same clergyman as her mother twenty-nine years since, and second daughter of John F. Trow, Esq., of New York.

HORTON—DUNNICA.—In St. Louis, Mo., on Thursday evening, the 6th inst., at the residence of the bride's father, by the Rev. S. A. Mutchmore, Dr. Samuel M. Horton, Assistant Surgeon United States Army, and Miss Sallie K., youngest daughter of Judge James Dunnica.

PATTERSON—CAMERON.—Aug. 13th, by Rev. Chas. Hill, Jas. B. Patterson, M. D., of Sterling, Ill., and Miss Sarah E. Cameron, daughter of the late Eli Cameron, Esq., of Philad'a.

DIED.

DARRACH.—At Vicksburg, Miss., July 18, of dysentery, Barrow Darrach, M. D., Surgeon U. S. V., aged 33 years, at the post of duty in the triumphs of a christian faith.

KIRBY.—In New York, suddenly, on Monday, Aug. 10th, Dr. Theodore Kirby, son of Dr. S. R. Kirby, in the 38th year of his age.

PARKE.—At St. John's Hospital, Cincinnati, Ohio, Dr. Wm. W. Parke, of New York City, on Monday, Aug. 3d, of typhoid fever contracted while in the employ of the Government as Assistant Surgeon in the gunboat service.

METEOROLOGY.

August.	3.	4.	5.	6.	7.	8.	9.
Wind.....	S. W.	S. E.	S.	S. W.	S. W.	S. W.	S. W.
Weather....	Clear.	Clear.	Clear.	Clear.	Clear.	Clear.	Clear.
Depth Rain...		2-10					
Thermometer							
Minimum.....	76°	74°	71°	70°	66°	69°	71°
At 8 A. M.....	85	78	79	78	76	79	83
At 12 M.....	90	88	84	85	84	87	87
At 3 P. M.....	92	90	85	86	87	84	88
Mean.....	85.7	82.2	79.7	79.7	78.2	79.7	82.2
Barometer.							
At 12 M.....	30.2	30.2	30.2	30	30.1	30	30

Germantown, Pa.

B. J. LEEDOM.

VITAL STATISTICS.

	Philadelphia. Week ending Aug. 10.	New York. Week ending Aug. 10.	Baltimore. Week ending Aug. 3.	Baltimore. Week ending Aug. 10.	Boston. Week ending Aug. 10.
Popl'n, (estimated.)	580,000	920,000	240,000	240,000	180,000
Mortality.					
Male	338	520	69	85	120
Female	220	450	62	69	66
Adults	212	386	54	60	92
Under 15 years.....	333	672	74	82	91
Under 2 years.....	282	462	47	62	85
Total.....	568	970	131	134	186
Deaths in 100,000...	97.53	215.55	54.58	64.16	100.09
American.....	432	636	...	...	121
Foreign.....	96	334	...	...	65
Negro.....	25	7	27	10	2
ZYMOTIC DISEASES.					
Cholera, Asiatic.....	1	...	...	...	...
Cholera Infantum....	128	180	20	24	61
Cholera Morbus.....	4	22	2	...	1
Croup.....	2	3	2	6	2
Diarrhœa.....	14	66	...	...	2
Diphtheria.....	11	12	3	...	4
Dysentery.....	12	20	2	6	6
Erysipelas.....	...	2	1	1	1
Fever, Intermittent...	...	1	2	1	...
Fever, Remittent....	...	...	...	...	...
Fever, Scarlet.....	4	15	2	4	...
Fever, Typhoid.....	8	11	2	9	8
Fever, Typhus.....	1	6	...	...	...
Fever, Yellow.....	...	...	...	...	...
Hooping-cough.....	3	3	...	...	...
Influenza.....	...	...	...	...	...
Measles.....	7	11	...	...	...
Small Pox.....	2	3	2	5	...
Thrush.....	...	...	...	...	1
SPORADIC DISEASES					
Albuminuria.....	...	5	...	...	...
Apoplexy.....	4	23	...	2	9
Consumption.....	46	71	17	17	17
Convulsions.....	20	71	4	3	6
Dropsy.....	15	29	1	2	6
Gun-shot Wounds....	20	2	...	...	...
Intemperance.....	3	2	1	1	4
Marasmus.....	30	8	...	...	5
Pleurisy.....	...	...	1	...	...
Pneumonia.....	15	...	...	...	1
Puerperal Fever....	...	2	...	...	...
Scrofula.....	1	...	...	...	...
Sun Stroke.....	11	88	...	...	8
Violence and Acc'ts	13	153	4	4	3

* Under 5 years.

TO CORRESPONDENTS.

For the information of those who are not authors, we will state that MANUSCRIPT INTENDED FOR PUBLICATION MUST BE WRITTEN ON BUT ONE SIDE of the sheet. If greater care was taken in the preparation of copy, much trouble would be saved to printers, and mistakes would rarely or never be made.

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Subscribers desiring old back numbers (excepting Nos. 304, 305, 308, 309, and 310, which are still due, and will be sent) will please remember and send money to pay for them and for postage, as many of the numbers are growing scarce, and we have to prepay the postage, two cents a number.